Statement by Scott Burns Deputy Director for State and Local Affairs White House Office of National Drug Control Policy Before the House Committee on Government Reform Subcommittee on Criminal Justice, Drug Policy and Human Resources June 16, 2006

Chairman Souder, Ranking Member Cummings, and Distinguished Members of the Subcommittee:

Thank you for the opportunity to appear before you today to discuss the Administration's *Synthetic Drug Control Strategy*. I thank the Subcommittee for its strong bipartisan commitment to our shared national goals of reducing the illicit use of methamphetamine and prescription drugs, and reducing the number of domestic methamphetamine laboratories. The Administration welcomes the opportunity to introduce the first-ever *Synthetic Drug Control Strategy*, a national effort to reduce the illicit demand for, and supply of, synthetic drugs like methamphetamine and prescription drugs.

Overview

The *Synthetic Drug Control Strategy* is a commitment by the Administration to work toward ambitious and concrete reductions in the illicit use of methamphetamine and prescription drugs, as well as in the number of domestic methamphetamine laboratories. Specifically, the Strategy aims to reduce illicit methamphetamine use by 15% over three years, illicit prescription drug use by 15% over three years, and domestic methamphetamine laboratory seizures by 25% over three years. The baseline year for all three goals is 2005.

The fundamental principles of the *Synthetics Strategy* are identical to those introduced in the Administration's *National Drug Control Strategy*: that supply and demand are the ultimate drivers in all illicit drug markets, and that a balanced approach incorporating prevention, treatment and market disruption initiatives (such as interdiction, arrests, prosecutions, and regulatory interventions) is the best way to reduce the supply of, and demand for, illicit drugs. Similar to the *National Strategy*, the *Synthetics Strategy* sets goals for reducing illicit drug use at a rate that approximates five percent per year.

Traditionally, Administrations have avoided promulgating strategies which relate to a specific drug or category of drugs. The *Synthetics Strategy* was developed for the American people due to the recognition that synthetic drugs like methamphetamine pose unique dangers, both in illicit use and production. Synthetic drugs also contain unique vulnerabilities, thus requiring a distinct strategy.

The *Synthetics Strategy* describes how those goals will be attained. It is both domestic and international in scope, and discusses priorities ranging from international diplomatic efforts to reduce the diversion of precursor chemicals used to make methamphetamine; state-led approaches to reducing domestic methamphetamine laboratories; the implementation of the

Combat Methamphetamine Epidemic Act of 2005; treatment and prevention initiatives; and various regulatory tools to address the problem of prescription drug diversion and abuse.

The Synthetics Strategy is also intended as a final report on the National Synthetic Drugs Action Plan, which was released in October 2004. That document contained 46 recommendations for government action. The Synthetics Strategy reports that 45 of the 46 recommendations are either completed or ongoing (some, by their nature, were not intended to terminate at a specific point in time). The one recommendation not included in that category pertains to illicit online pharmacies, and the Synthetics Strategy recognizes the need for new Federal legislation to address the problem. The Synthetic Drugs Interagency Working Group, the interagency structure which developed the Administration's Synthetic Drug Control Strategy, will continue to monitor and discuss the implementation of those 46 recommendations and the overall Synthetics Strategy itself.

Process

The *Synthetic Drug Control Strategy* was developed by the Synthetic Drugs Interagency Working Group (SDIWG), an interagency team of Administration officials composed of the Office of National Drug Control Policy, the Departments of State, Justice, Homeland Security, Health and Human Services, Transportation, the Environmental Protection Agency, and the Office of the United States Trade Representative. Director Walters appointed me co-chair of the SDIWG with senior officials from the Departments of Justice and Health and Human Services. The SDIWG met approximately every two months to review synthetic drug control policy, coordinate its implementation, and discuss which initiatives should be formalized as Administration policy in the *Synthetic Drug Control Strategy*.

ONDCP staff responsible for the drafting of the *Synthetics Strategy* consulted with Federal, State and local officials prior to and during the drafting process in three significant ways. First, every year, ONDCP staff tasked with writing the *National Drug Control Strategy* request input in writing from experts throughout the country, including members of Congress and State/local law enforcement. Because the 2006 *National Drug Control Strategy* and the *Synthetic Drug Control Strategy* were drafted during the same time frame, ONDCP staff culled out and reviewed all responses related to synthetic drugs such as methamphetamine or prescription drugs. Many of these suggestions were presented to the SDIWG and ultimately incorporated into the *Synthetic Drug Control Strategy*.

Second, ONDCP staff reached out to specific groups or individuals with known experience and expertise in synthetic drug control policy. For example, on November 14th, 2005, as the drafting process began, ONDCP staff sent an email to every High Intensity Drug Trafficking Area (HIDTA) program director requesting the views of the HIDTA Directors and HIDTA-associated law enforcement officials "as to how the Administration should fight synthetic drugs like methamphetamine over the next three years" for the purpose of drafting an Administration strategy related to synthetic drugs. In addition to a few individual responses, a collective response was received, reviewed by ONDCP staff and SDIWG leadership, and ultimately several of the HIDTA Directors' suggestions were incorporated into the *Synthetic Drug Control Strategy*. Similarly, in developing two initiatives in the *Synthetics Strategy* which aim to benefit

State and local efforts – holding four regional methamphetamine conferences and developing Prescription Drug Monitoring Programs – SDIWG leadership and ONDCP staff responsible for drafting the *Synthetics Strategy* have worked, and are continuing to work, with senior staff at the National Alliance for Model State Drug Laws, an organization with expertise in both topics.

Third, one of my responsibilities as Deputy Director for State and Local Affairs is to be a liaison with state and local law officials. Thus, in my dual role as Deputy Director for State and Local Affairs and co-chair of the SDIWG, I have traveled to nearly all fifty states over the last four years on behalf of the President and Director Walters, and the majority of my speeches or meetings concern, at least in part, synthetic drugs such as methamphetamine or prescription drugs. These meetings have afforded me the opportunity to discuss Administration policy, but perhaps more importantly were an invaluable opportunity to consult with State and local officials about the challenges they face related to methamphetamine and other drugs. These discussions were critical to the development of the *Synthetic Drug Control Strategy*.

Measuring Performance

The three overarching goals of the *Synthetics Strategy* are intended to guide the Administration's efforts related to the control of synthetic drugs for the remainder of President Bush's second term. As such, those three goals target certain reductions in illicit drug use or production by the year 2008. The Administration will report annually as to progress in meeting those objectives, using the National Survey on Drug Use and Health to measure use, and the Drug Enforcement Administration's El Paso Intelligence Center's Clandestine Laboratory Seizure Service to measure domestic methamphetamine laboratory incident reports.

Continuing Progress: A Status Report

The *Synthetics Strategy* describes the results from the implementation of the President's *National Drug Control Strategy* and the continuing challenges we face regarding synthetic drugs. Notable trends include decreases in the past-month use of any illicit drug among youth by 19 percent and past month use of methamphetamine use by 36 percent³ since 2001. Similarly, the illicit use of steroids dropped dramatically among youth from 2001 to 2004 with the illicit use of steroids down 38 percent, 37 percent, and 30 percent for lifetime, past year, and past month use, respectively. The past-month use among teens of hallucinogens and LSD use is down by nearly two-thirds, as is past-month Ecstasy (3, 4 methylenedioxy-methamphetamine, or MDMA) use. Marijuana use has also dropped in all three categories: 13 percent for lifetime use, 15 percent for past year use, and 19 percent for 30-day use, decreasing 28 percent among 8th graders (from 9.2 percent to 6.6 percent), and 23 percent among 10th graders (from 19.8 percent to 15.2 percent).

With respect to domestic methamphetamine production, after an increase in domestic methamphetamine laboratories observed in the 1990s and early 2000s, domestic laboratory numbers appear to have taken a sharp downturn in 2005, thanks largely to innovative strategies

¹ "Youth" refers to 8th, 10th, and 12th graders, the populations measured by the *Monitoring the Future* study.

² 2005 *Monitoring the Future*. Special analysis conducted for the Office of National Drug Control Policy by MTF researchers.

³ Ibid.

employed by the States. After peaking with more than 17,500 laboratory incidents reported in 2004, data for 2005 shows a substantial and significant reduction in methamphetamine laboratory incidents. Since 2002, the number of domestic "super labs" reported—those methamphetamine laboratories with a production capacity estimated at 10 or more pounds within a 24-hour period—has posted a dramatic decline, falling from 142 in 2002 to just 35 in 2005, due largely to Federal law enforcement interventions at our shared border with Canada, and to cooperation with Canadian authorities to stem the smuggling of pseudoephedrine into the United States. The Administration seeks to continue such reductions with the implementation of the Combat Methamphetamine Epidemic Act of 2005 (the "Combat Meth Act).

Methamphetamine

The most urgent priority of the Federal government toward reducing the supply of methamphetamine in the United States will be to tighten the international market for chemical precursors, such as pseudoephedrine and ephedrine, used to produce the drug. Most of the methamphetamine used in America—probably between 75 and 85 percent—is made with chemical precursors that are diverted at some point from the international stream of commerce. The remainder of the methamphetamine is produced from chemical precursors that are purchased at the wholesale or retail level and diverted for use in illicit production in the United States.

Toward this end, ONDCP Director John Walters has met with Ambassadors from China, India and the European Union. The Administration worked with allies in the international community to draft, promote, and adopt a resolution on synthetic drug precursors, including methamphetamine precursor chemicals, at the annual meeting of the United Nations Commission on Narcotic Drugs (CND), which is the central policy-making body within the United Nations system dealing with drug-related matters. The CND supervises the application of international conventions and agreements regarding narcotic drugs and provides advice on the control of narcotic drugs, psychotropic substances and their precursors. In March 2006, the CND member states unanimously adopted the synthetic drug precursor resolution proposed by the United States and cosponsored by a number of CND member nations.

The second prong of the Federal government's strategy to tighten the international precursor market involves implementation of the Combat Meth Act. This important legislation, passed by Congress and recently signed by the President, contains a comprehensive set of regulations designed to help tighten the market for pseudoephedrine and other chemical precursors to methamphetamine. The *Synthetics Strategy* provides detail as to the various requirements of the new law, which agencies in the Administration are responsible for implementation, and along what timeline the various requirements will be implemented.

The third prong of the international precursor strategy is to continue working closely with Mexico through aggressive law enforcement activities against precursor trafficking and methamphetamine production and trafficking, and to strengthen border protection at our shared border with Mexico. Improving our bilateral efforts with Mexico to prevent methamphetamine

⁴ This document will frequently use the term pseudoephedrine to generically describe three chemicals commonly used as methamphetamine and amphetamine precursors: pseudoephedrine, ephedrine, and phenylpropanolamine.

smuggling, working with Mexican law enforcement, and encouraging the Mexican government to reduce precursor chemical diversion are also called for in the Combat Meth Act.

Domestically, the *Synthetics Strategy* recognizes the critical role that state and local law enforcement, as well as treatment and prevention professionals, play in addressing the methamphetamine threat. The *Synthetics Strategy* contains a ten-part plan to enhance the Federal partnership with state and local agencies related to methamphetamine. For example, the plan encourages States to include in their comprehensive drug control strategies a plan to address regional methamphetamine and controlled substance prescription drug abuse threats; expand Drug Endangered Children programs and Prescription Drug Monitoring Programs nationwide; continue ambitious law enforcement training programs related to methamphetamine; and improve data collection and sharing of best practices related to illicit methamphetamine use and production.

The President's Fiscal Year '07 Federal Drug Control Budget seeks increases in funding for methamphetamine lab clean-up (from \$20 million to \$40 million) and an increase in funding for Drug Courts from approximately \$10 million to \$70 million. The budget also provides \$41.6 million in methamphetamine-targeted treatment research and a dedicated \$25 million for methamphetamine treatment services within the Access to Recovery program administered by the Substance Abuse and Mental Health Services Administration (SAMHSA) of the Department of Health and Human Services (HHS). The High Intensity Drug Trafficking Area (HIDTA) program continues to attack methamphetamine traffickers and domestic labs, as evidenced by the fact that some 96 specific HIDTA initiatives target methamphetamine, more than any other specific drug in America.

Treatment and prevention initiatives are critically important elements of the *Synthetics Strategy*. The National Institute for Drug Abuse (NIDA) is continuing to research the most effective way of treating methamphetamine addiction. Additionally, in spring 2006, the SAMHSA held two regional meetings with States on methamphetamine issues. The summits were specifically designed for those State agency staff involved in developing, regulating, and funding methamphetamine treatment. The Administration will hold four regional methamphetamine summits in partnership with the National Alliance for Model State Drug Laws.

Additionally, the Administration continues to support drug courts as an innovative approach for helping nonviolent offenders achieve a drug-free life. The coercive power of the courts, together with the support of family, friends, and counselors, has been shown to be an effective mechanism for achieving drug abstinence and reducing recidivism. One study has shown that 43.5 percent of offenders who did not participate in a drug court program are rearrested for a serious offense, while only 16.4 percent of drug court graduates are rearrested. For fiscal year 2007, the President has requested a significant increase in support to States for drug courts above the enacted fiscal year 2006 level.

⁵ J. Roman, W. Townsend, and A. Bhati (2003, July). National estimates of drug court recidivism rates. Washington, DC: National Institute of Justice, U.S. Department of Justice. These figures are for all drug court participants, not just those with a history of methamphetamine use.

SAMHSA's Access to Recovery (ATR) program is a voucher-based program intended to expand access to innovative drug and alcohol and to effective substance abuse treatment and recovery support services, including faith-based providers. In August of 2004, SAMHSA awarded grants to 14 States and one tribal organization. It is estimated that this cohort of grantees will serve approximately 125,000 individuals over the three-year life of the grants. In the President's 2007 budget, the ATR program includes approximately \$25 million in vouchers for methamphetamine treatment that will fund approximately 10 grants to State applicants whose epidemiological data indicate high methamphetamine prevalence.

Moreover, SAMHSA announced 11 new, three-year grants to provide treatment for methamphetamine abuse and other emerging drugs for adults residing in rural communities. These grants total \$5.4 million for the first year and approximately \$16.2 million for all three years.

With respect to prevention, NIDA continues to support research to develop effective drug abuse prevention programs. In 2003, NIDA revised its *Preventing Drug Use Among Children and Adolescents: A Research-Based Guide for Parents, Educators, and Community Leaders,* which presents updated research-based prevention principles, an overview of program planning, and critical first steps for those learning about prevention. Because the goal of drug abuse prevention efforts is to prevent the initiation of drug use, most of these prevention efforts are not targeted toward any specific drug. However, recent results also demonstrate that these universal prevention programs can be effective at reducing methamphetamine abuse specifically.

Starting in late 2005, ONDCP and the Partnership for a Drug-Free America launched a new television advertising campaign to highlight the dangers of methamphetamine. The antimethamphetamine media campaign and the utilization of these commercials by communities most affected by methamphetamine are important components of the Administration's plan to prevent the illicit use of the drug among both youth and the general population. The antimethamphetamine campaign was launched in Springfield, Missouri, and is being expanded to 23 cities nationwide.

Prescription Drug Abuse

The Synthetic Strategy also addresses prescription drug abuse, often called the "non-medical use of prescription drugs." The Administration's ambitious goal of reducing prescription drug abuse by 15% by the end of 2008 must balance two general policy concerns: first, to be aggressive in reducing overall user abuse and, second, to avoid overreaching and avoid making lawful acquisition of prescription medications unduly cumbersome. The seriousness of this problem cannot be overstated, as prescription drug abuse has risen to become the second most serious drug problem measured in terms of prevalence, with past-year abusers numbering approximately 6 million.

The Administration, again in cooperation with Federal, State and local partners and with the overall strategy of prevention/education, treatment and law enforcement in mind, will continue to target doctor shopping and other prescription fraud as well as illegal online pharmacies; continue efforts to thwart thefts and burglaries from homes and pharmacies; focus on strategies to combat

stereotypical drug dealing (selling of pills from a dealer to user); and investigate and prosecute those in the medical profession -- as distinguished from the vast majority that prescribe appropriately -- who are engaged in illegal overprescribing for profit. We will continue to work with those states that have yet to implement a prescription monitoring program.

Conclusion

Mr. Chairman, I would like to personally thank you, the members of the Subcommittee and the members of the House and Senate Meth Caucuses for your individual and combined efforts in addressing the issues. I look forward to working closely with members as the Strategy is implemented and conferring along the road as we strive together to meet the goals we have set forth on behalf of the American people. Thank you and I look forward to any questions you may have regarding the *Synthetic Drug Control Strategy*.